

PTO/SB/02A (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

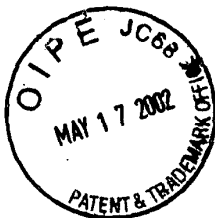
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>2</u>
--------------------	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Kevin T.		Family Name Madden	
Inventor's Signature <i>Kevin T. Madden</i>		Date 4/1/02	
Residence: City Charlestown	State MA	Country US	Citizenship USA
Mailing Address 40 Chestnut Street, #B			
Mailing Address			
City Charlestown	State MA	ZIP 02129	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name G. Todd		Family Name Milne	
Inventor's Signature <i>G. Todd Milne</i>		Date 3-28-02	
Residence: City Brookline	State MA	Country US	Citizenship USA
Mailing Address 169 Mason Terrace			
Mailing Address			
City Brookline	State MA	ZIP 02446	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Amir		Family Name Sherman	
Inventor's Signature		Date	
Residence: City Jerusalem	State	Country Israel	Citizenship Israel
Mailing Address Shai Agnon-15			
Mailing Address			
City Jerusalem	State	ZIP	Country Israel

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



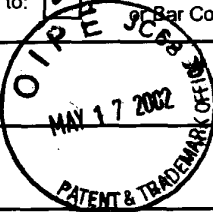

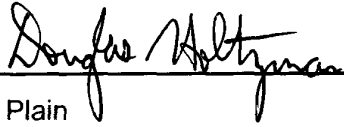
0

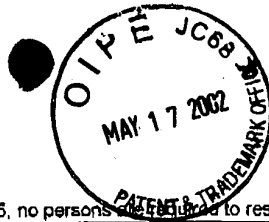
DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet 1 2
--------------------	--

Name of Additional Joint Inventor, if any: <input type="checkbox"/>			
Given Name Kevin T.		Family Name or Surname Madden	
Inventor's Signature		Date	
Residence: City Charlestown	MA State	US Country	USA Citizenship
Mailing Address 40 Chestnut Street, #B			
Mailing Address			
City Charlestown	MA State	02129 ZIP	USA Country
Name of Additional Joint Inventor, if any: <input type="checkbox"/>			
Given Name G. Todd		Family Name or Surname Milne	
Inventor's Signature		Date	
Residence: City Brookline	MA State	US Country	USA Citizenship
Mailing Address 169 Mason Terrace			
Mailing Address			
City Brookline	MA State	02446 ZIP	US Country
Name of Additional Joint Inventor, if any: <input type="checkbox"/>			
Given Name Amir		Family Name or Surname Sherman	
Inventor's Signature <i>A. Sherman</i>		Date 04/04/02	
Residence: City Jerusalem	State	Israel Country	Israel Citizenship
Mailing Address Shai Agnon-15			
Mailing Address			
City Jerusalem	State	ZIP	Israel Country

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number		32254		OR <input type="checkbox"/> Correspondence address below	
					
Name					
Address					
City		State		ZIP	
Country		Telephone		Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR :			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Brian M. (first and middle [if any])			Family Name Cali		
Inventor's Signature 			Date 4/1/02		
Arlington Residence: City		MA State	USA Country	USA Citizenship	
100 Hillside Avenue					
Mailing Address					
Arlington City		MA State	02478 ZIP	USA Country	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Douglas (first and middle [if any])			Family Name Holtzman		
Inventor's Signature 			Date 4/1/02		
Jamaica Plain Residence: City		MA State	USA Country	US Citizenship	
821 Centre Street, #6					
Mailing Address					
Jamaica Plain City		MA State	02130 ZIP	USA Country	
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>2</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					



PTO/SB/02A (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION**ADDITIONAL INVENTOR(S)****Supplemental Sheet**Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Jeffrey C.		Family Name Silva	
Inventor's Signature <i>Jeffrey C. Silva</i>		Date 4/4/02	
Beverly	MA	US	USA
Residence: City	State	Country	Citizenship
95 Hale Street Mailing Address			
Mailing Address			
Beverly	MA	01915	USA
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Joshua		Family Name Trueheart	
Inventor's Signature		Date	
Concord	MA	US	USA
Residence: City	State	Country	Citizenship
172 Annursnac Hill Road Mailing Address			
Mailing Address			
Concord	MA	01742	US
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Lixin		Family Name Zhang	
Inventor's Signature		Date	
Lexington	MA	US	China
Residence: City	State	Country	Citizenship
15 Farmcrest Avenue Mailing Address			
Mailing Address			
Lexington	MA	02421	USA
City	State	ZIP	Country

Birden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PTO/SB/02A (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

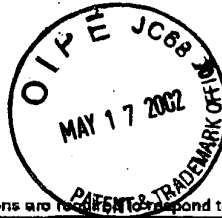
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>2</u>
--------------------	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Jeffrey C. Given Name		Silva Family Name or Surname	
Inventor's Signature		Date	
Beverley Residence: City	MA State	US Country	USA Citizenship
95 Hale Street Mailing Address			
Mailing Address			
Beverley City	MA State	01915 ZIP	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Joshua Given Name		Trueheart Family Name or Surname	
Inventor's Signature <i>[Signature]</i>		Date 4/4/02	
Concord Residence: City	MA State	US Country	USA Citizenship
172 Annursnac Hill Road Mailing Address			
Mailing Address			
Concord City	MA State	01742 ZIP	US Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Lixin Given Name		Zhang Family Name or Surname	
Inventor's Signature		Date	
Lexington Residence: City	MA State	US Country	China Citizenship
15 Farmcrest Avenue Mailing Address			
Mailing Address			
Lexington City	MA State	02421 ZIP	USA Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PTO/SB/02A (10-00)
Approved for use through 10/31/2002. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1996, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>2</u>
--------------------	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Jeffrey C.		Family Name Silva	
Inventor's Signature		Date	
Beverley Residence: City	MA State	US Country	USA Citizenship
95 Hale Street Mailing Address			
Mailing Address			
city Beverley	MA State	01915 ZIP	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Joshua		Family Name Trueheart	
Inventor's Signature		Date	
Concord Residence: City	MA State	US Country	USA Citizenship
172 Annursnac Hill Road Mailing Address			
Mailing Address			
city Concord	MA State	01742 ZIP	US Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Lixin		Family Name Zhang	
Inventor's Signature <i>Lixin Zhang</i>		Date 04/04/02	
Lexington Residence: City	MA State	US Country	China Citizenship
15 Farmcrest Avenue Mailing Address			
Mailing Address			
city Lexington	MA State	02421 ZIP	USA Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.